CSAT Asia Pacific Year 1 Progress Report

2008 TIMEFRAME	ACTIVITY
QTR 1: Jan-Mar	• Conduct Needs Assessment of *CS regarding GFTAM • Attend Global CSAT program Meeting • Complete Assessment & Develop Initial Work Plan • Implement WP & Begin In Country activity
QTR 2: Apr-Jun	• Submit Report Quarter 1 • Hire Staff • Open Office (Indonesia) • Network strengthening of Key Affected Populations (KAPS) identified as an on-going need • Round 8 proposals activities • Round 8 proposals due
QTR 3: July –Sept	• Submit Report Quarter 2 • CSAT meetings in Mexico City at IAC • Begin preparations for Round 9 • Implement activities for R9 • Continue Indonesia activities • Support Regional MSM Proposal (APCOM)) • Identify 2 other countries (Malaysia, TBD) • Document lessons learned from Previous Round
QTR 4: Oct-Dec	• Submit Report Quarter 3 • Workshops (partnership/support others) ☙ Consultants working with CS (with TSF) ☙ CS Participation in GFATM (with TSF) ☙ CSS for R9 (ICAA, APN+,7S) • CSS components for Indonesia, China, Cambodia, Thailand, Vietnam, Malaysia, India and possibly Fiji • Conduct Survey on CCM Knowledge • ICASO Planning Meeting • In-Country Activity (Cambodia) • CSS Workshop Report • GFATM Partnership Meeting • Renegotiate coming Year (2 & 3)
2009	• Diversify Funding • Expand coverage of AP Region • Focus on CSS for R9-10 Indonesia, Cambodia, Malaysia, Thailand, China, India, & possibly Fiji • Focus on KAPS (PUD,MSM, SW) • 3 KAPS Consultations • Produce CSS Paper for AP Region • ICAAP

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CSAT AP Focused on Indonesia for Year 1 Round 8: CSAT AP Host (Coalition Secretariat) traveled to Morocco to meet the Global CSAT partners in March. Previously, with limited resources and a timeframe the CSAT AP's regional host had found it difficult to launch the CSAT initiative regionally.   At the Morocco meeting a decision was made to focus on 1 Country, Indonesia, and work mostly by sharing information with other countries.   Travel to Indonesia occurred in April and June 2008 to negotiate and help set-up the CSAT Indonesia Office. This involved extensive negotiations and consultations with the National AIDS Commission (NAC), members of the Country Coordinating Mechanism (CCM), community representatives from key populations particularly PLHIV and People Who Use Drugs (PUD), Spiritia (National ASO), UNAIDS, UNDP, UNODC and other stakeholders involved in the Indonesia AIDS response. Official start date for the CSAT Team was 1 May 2008 but hired staff attended a CCM activity related to Round 8 on 28 April 2008. CSAT Indonesia staff were active in the development and submission of Indonesia's HIV Proposal for the GFTAM's Round 8. In addition, CSAT Indonesia staff conducted Network strengthening activities for and helped to formalize the national network of PLHIV and People Who Use Drugs (PUD) including attendance at Indonesia's National Harm Reduction Conference in June with the Coalition Secretariat. Provincial activities included attending a meeting with, at their invitation, a Sex Worker Network to establish contact, begin development of a working relationship and assess their needs for future GFATM proposals. Lastly, CSAT Indonesia developed a bi-lingual brochure (English and Bahasa) and design for a CCM website which was approved and accepted to make information more accessible for Indonesia's communities of Key Affected Populations (KAPs).   CSAT advocacy efforts also lead to the CCM inviting the PLHIV and PUD networks to place 2 representatives each when the CCM membership is up for re-election in January 2009 and a seat for MSM. The success of CSAT Asia Pacific in it's first year has been acknowledged by the other CSAT partners and stakeholders within the AP region as a prime example of what can happen when CS, government, policy makers, donors and other stakeholders can accomplish when partnership is established. CSAT AP's work in Indonesia is significant in that it will serve as a model for CSAT's future work within the AP region, particularly when working with other countries in South East Asia. In the submissions for Round 8 Indonesia's efforts were rewarded with 3 Category 1's for their proposals for HIV, TB and Malaria.

CSAT AP AND MALAYSIA: The Coalition of Asia Pacific Regional Networks on HIV/AIDS, CSAT regional host of the Asia Pacific, has established strong ties with CSOs in Malaysia this has made the introduction of CSAT much easier. CSAT AP shared information with CS representatives regarding Malaysia's qualifying for GFATM Round 8 in March 2008. Initially there appeared to be little interest in the GFATM but a CS driven Work Group was formed and a process to develop the necessary framework including establishment of a CCM to produce a proposal was implemented. The GFATM process in Malaysia has almost entirely been driven by CS which is unlike other countries in the Asia region.   CSAT AP has conducted intensive in-country work sessions in September and October with the GFWG and MAC to guide and support Malaysia CS in readying a proposal for R9 as well as including Malaysia in the consultation for the development of CSS components for R9. Negotiations are in process to designate a clear role for CSAT AP and possibly utilize a similar model to what was done in Indonesia for Round 8. CSAT AP has begun advocacy efforts on behalf of the GFWG to ensure that the actions taken by the group will not be lost and the limited resources maximized.

CSAT AP & CSS: Round 8 presented an opportunity for countries to strengthen community organizations in terms of increasing their performance in the form of an endorsement to include a Community System Strengthening (CSS) component into the grant proposal submissions, however

the initiative to include such measures has been limited and few countries have used this opportunity to actually strengthen the capacity of community based organizations or national networks. The main reason for this is, as we have learned from some Asian countries, is the lack of CCM's understanding of this crucial component and also lack of technical skills in integrating this component into the grant proposals. Effort must be made to ensure this component is integrated into grant proposals, as it would be crucial for community-based organizations/networks to enhance their capacity. The Coalition of Asia Pacific Regional Networks on HIV/AIDS (7 Sisters) (regional host of CSAT in Asia Pacific), Civil Society Action Team AP (CSAT), Asia Pacific Network of PLHIV (APN+) and the team for Community Follow-up to the Independent Commission on AIDS in Asia's (ICAA) report - consider CS involvement in CCM as a significant opportunity to increase the quality of AIDS response which the CSS initiative further enhances, therefore it is essential to facilitate a learning process for these countries to maximize these opportunities. In order to strengthen & increase the quality of CS involvement, these organizations initiated a forum (more info next paragraph) to allow these CS representatives to share their experiences and challenges in the GF process to learn from each other. Furthermore, the forum presented unique opportunities to endorse the development and integration of CSS components into round 9 - country proposals, develop advocacy strategies and messages that integrate the recommendations made by the ICAA and begin the move to this more effective response. CSAT AP will appoint a CSS Specialist for the period through Round 9 who will work closely with the CSAT team and partner organizations to promote CSS across the AP and document the outcomes of the CSS Consultation.

CSAT AP CURRENT ACTIVITIES: CSAT AP will work to strengthen the partnership with HDN Secretariat as well as HDN's CSCPP (Civil Society Country Platform Partnerships in Vietnam, Cambodia, & Malaysia) who were instrumental in the development and implementation of the CS survey which brought over 600 community voices and perspectives into the ICAA report launched in March 2008. HDN supported CSAT AP in conducting the survey on CS Knowledge of CCM by distributing the survey across their SEA AIDS List Serve, translating the survey into Thai and Cambodian and then distributing it amongst the CSCPP networks. The CCM survey garnered nearly 300 responses (over 200 are from Indonesia) and the results are currently being analyzed.

CSAT AP staff participated in 2 Work Shops/Trainings with the Technical Support Facility (TSF) South East Asia Pacific (SEAP) on Civil Society Participation and Developing a Proposal for GFATM in September and October. For Round 9 and 10, CSAT AP will focus on developing Civil Society Systems Strengthening (CSS) components for Indonesia, Cambodia, Malaysia, Thailand, China, India, & possibly Fiji. A Consultation of CS representatives on the CCMs of the selected countries was convened in October 2008 to not only identify issues and assess needs but to develop a strategy for these CS representatives to return to their respective CCMs and advocate for inclusion of a CSS component into their Round 9 proposals which will be due on 1 June 2009. CSAT will coordinate advocacy efforts with the Independent Commission on AIDS In Asia (ICAA), APN+, Health Development Networks' (HDN) and Seven Sisters to along with the CS representatives at the consultation influence CCMs in the listed countries to include a CSS component in their proposals for R9 or R10. ICAA developed and submitted a proposal o TSF SEAP for 1 Regional Consultant and 6 local Consultants to work In-Country with the CS representative to develop these CSS components which has been accepted, funded and the regional consultant identified and secured. Since the CSS Consultation, CSAT AP has learned that CSS components for Indonesia, China, and Cambodia have been accepted which will hopefully be integrated into those country's proposals and CSS components for Vietnam, Malaysia, India and Fiji are in development.

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